Attachment 1

WASTE ANALYSIS PLAN

Appendix C
FORMS

MIXED WASTE FACILITY
RCRA/TSCA PERMIT APPLICATION

PERMA-FIX NORTHWEST RICHLAND, INC.
RICHLAND, WASHINGTON

EXMPLE PROCESS DATA SHEET

PDS Number _____ Date _____ Page ___ of _____

MIXED WASTE FACILITY

PROCESS DATA SHEET

A Process Data Sheet (PDS) must be developed before processing a waste stream for chemical Adjustment, stabilization, or macro-encapsulation. The data sheet must specify step-by-step Procedures to be implemented by the operator to achieve the treatment objectives safely.

1. Waste Characteristics: *Specify information used to develop the process data sheet.*

A. Container Type: _____, **Gross Volume**_____,
Gross weight:_____

B. Chemical composition and concentration:

C. Waste profile ID number:

D. Facility waste stream designation:

E. Treatability test information:

2. LDR Treatment Requirements: *Give treatment designation for the waste stream.*

3. Disposal Requirement: *Specify the site or plant where the treated waste will be sent.*

4. Treatment Process Designation: *List the specific treatment process and system/equipment used for treating the waste stream.*

5. Batch Size Selection: *Select treatment batch size consistent with the reaction chemistry Control, worker handling, equipment and vent system operation and other safety issues.*

EXMPLE PROCESS DATA SHEET

PDS Number _____ Date _____ Page ___ of _____

6. Equipment Inspection: *Inspect integrity of each piece of equipment and list any restrictions and/or equipment maintenance requirements.*

7. Equipment Calibration: *Review, calibration and testing requirements of each piece of Equipment and instrument, if applicable..*

8. Preventative Measures: *List preventative health and safety procedures to be used during the process operation. Review waste and reagent characteristics and determine: 1) compatibility with tanks, mixers, piping, valves, pumps, and TICs; 2) enclosure inerting requirements; 3) volatility of compounds in waste and compatibility of vapors with the STB process vent system material construction; 4) worker safety and personnel protective equipment requirements considering the flammability, toxicity, and other hazard characteristics of the waste.*

A. Equipment Protection Measures:

B. Reaction Control: *Identify conditions causing violent reactions, temperature surges, and splashing of the chemical and provide instructions to prevent such hazards.*

C. Worker Protective Equipment:

9. Equipment and Consumable Requirements: *List consumables and equipment needed for the selected process.*

10. Container Selection: *Specify the transportable in-process container (TICs) and disposal Containers to be used for the process.*

11. Process Performance Parameter and Measurement Method: *List the required performance parameters and methods for measuring compliance with the selected parameters.*

EXMPLE PROCESS DATA SHEET

PDS Number _____ Date _____ Page ___ of _____

These parameters are normally determined taking into account two considerations: 1) the parameters that must be measured to indicate the given hazards characteristics of the waste have been properly removed and treatment is complete, 2) the requirements imposed by the next step of treatment step are met, if applicable.

12. Reagent Requirements: *Reagents required to perform the process are specified. For D002 and D003, provide the stociometry reaction including the weight and volume of chemicals used.*

13. Transferring Waste to Smaller Reaction Containers: *Provide instructions for transfer operations for waste streams in containers larger than the selected batch size.*

14. Waste Treatment Operations Procedure: *Specify detailed steps for executing the waste treatment process.*

15. Treatment Verification. *List steps for measuring compliance with the treatment performance requirements.*

16. Equipment Cleaning and Rinse: List steps for post-process rinsing and/or cleaning of equipment.

17. Disposition of Spent Rinse Solution: *List the steps and methods for treatment and disposition of the spent rinse solution.*

Prepared by: _____ **Signature:** _____

Date:_____

EXMPLE PROCESS DATA SHEET

Approved by: Production Supervisor **Signature:** _____

Date: _____

Approved by: Analytical Lab Supervisor **Signature:** _____

Date: _____

Approved by: Regulatory Comp. Officer **Signature:** _____

Date: _____

EXAMPLE CERTIFICATION OF REPRESENTATIVE SAMPLE

GENERAL INSTRUCTIONS: In order to determine whether we can accept the special waste described in the above-numbered profile sheet, we must obtain a representative sample of the waste. We will analyze the sample to verify the information you have provided us, so it is particularly important that the sample be truly representative. In most circumstances you will be obtaining the sample. However, in those cases in which we obtain the sample, we must ask that one of your employees be present to direct the particular source to be sampled and to witness the sampling. In such case, your employee must sign this certification as a witness.

This certification must be returned, with representative waste sample to:

_____

_____

_____

_____

The undersigned certifies that he/she obtained a representative sample of the waste material described in the above-referenced "Generator's Waste Material Profile Sheet:, and that the following representations are true and correct:

1. Hour and date of sampling: _____
2. Source from which sample was taken: _____
   _____
3. Equipment and sampling method used:
   _____
4. Amount of sample obtained: _____
5. Type of container into which sample was placed: _____
   _____
6. The sampling equipment used and the container into which the sample was placed were themselves uncontaminated before use.
7. At the time of sampling, I affixed a label to the container in the following form with the following information (fill in this portion, including your signature, just as it appears on the label you prepared):

Generator:
Waste Name:
Sample Hour/Date:
Profile Sheet Code:
Sampler Signature:

WITNESS VERIFICATION: I was personally Present during the sampling described. I directed the waste source to be sampled and I verify the information noted above.

WITNESS: _____ **SAMPLER NAME:** _____

SIGNATURE: _____ **SIGNATURE:** _____

TITLE: _____ **TITLE:** _____

EMPLOYER: _____ **EMPLOYER:** _____

DATE: _____ **DATE:** _____

EXAMPLE INCOMING SHIPMENT ACCEPTANCE PROCEDURE AND CHECKLIST

☐ **ACCEPTED**
☐ **REJECTED**

EPA ID# _____ Generator: _____
Waste Name: _____ Date: _____
Manifest No. _____ Tracking No: _____

ARRIVAL CHECKLIST: Check Y or N below for the incoming waste. Inform the site manager of any items marked "N". Once the waste is accepted or rejected, check the corresponding box above.

1. ☐Y ☐N Is a complete copy of the Waste Profile Record in the site files?
2. ☐Y ☐N Is the Waste Profile Record updated to within one year of today's date?
3. ☐Y ☐N Is a completed copy of the Acceptance Sample Information form in the files?
4. ☐Y ☐N Was the previous shipment accepted without special consideration?
5. ☐Y ☐N Is the hazardous waste manifest complete and comparable to previous manifests?
6. ☐Y ☐N Does the manifest accurately match the wastes on the shipment?
7. ☐Y ☐N Do the EPA Waste ID numbers match the numbers on the Acceptance Sample Information Form?
8. ☐Y ☐N Do the shipping papers indicate that the waste is not land-disposal restricted?

9. _____ Prepare to safely inspect and sample the waste. Review the Acceptance Sample Information Form, the Waste Profile Record and the manifest for potential health and safety hazards. Wear safety eye wear, gloves, protective clothing and footwear.
10. ☐Y ☐N Are the containers in acceptable condition? (Check Y if not applicable.)
11. _____ Visually inspect the contents of each container. Use #12 for this inspection result.
12. ☐Y ☐N Does the waste match the general description provided on the Waste Profile Record?

13. _____ Sample and analyze the waste according to the Waste Analysis Plan for incoming shipments.
14. ☐Y ☐N Was the sampling procedure followed? (If no, the Laboratory Supervisor or Site Manager must sign this form and reasons for the waiver must be noted below.)
15. ☐Y ☐N Was the onsite analysis carried out? (If no, the Site Manager must sign this form and the reasons for the waiver must be noted below.)
16. _____ Record the results of analysis on the Acceptance Sample Information form.
17. ☐Y ☐N Are all of the results within the established tolerances?
18. _____ If accepted, sign the manifest and record the tracking and manifest numbers.
19. _____ Replace all lids on the containers. Label each container with the tracking number. Make the shipment ready for movement.

NOTE ANY DISCREPANCIES OBSERVED DURING THE ACCEPTANCE PROCEDURE: (If discrepancies are corrected and the shipment is accepted, note the discrepancies, cite the measures taken to correct the problem, use additional form if necessary, and attach this form to it. Use the reverse side of this form for more space if necessary.)

_____
_____

_____ _____
Inspector's Signature Laboratory Supervisor's or Site Manager's Signature, if applicable

EXAMPLE CERTIFICATION FROM TREATMENT FACILITY TO DISPOSAL FACILITY FOR WASTES MEETING RCRA CONCENTRATION-BASED TREATMENT STANDARDS IN §§268.32, 268.40, OR RCRA §3004(d)

The wastes identified on manifest number _____ and bearing the EPA Hazardous Waste Number(s) _____ are subject to the land disposal restrictions of 40 CFR Part 268. The wastes comply with the contamination-based treatment standards specified in Part §268.40 or RCRA Section 3004(d). The required information applicable to each waste is identified below (check all boxes that apply):

☐ This shipment includes F001-F005 spent solvents, as identified on the attached sheet. [If this box is checked, attach Figure 3.17(b), check the hazardous waste number(s) that apply, and circle or otherwise identify individual constituents likely to be present in the waste.]

☐ This shipment includes F039 multi-source leachate, as identified on the attached sheet(s). [If this box is checked, attach Figure 3.17(c) and circle or otherwise identify individual constituents likely to be present in the waste.]

☐ This shipment includes D012-D017 nonwastewaters and/or D018-D043 characteristics wastes prohibited under §268.38, as identified on the attached sheet(s). The wastes will not be managed in CWA/CWA-equivalent/ Class I SDWA systems. [If this box is checked, attach Figure 3.17(c) and, for each waste, identify the hazardous waste number, treatability group, and subcategory in the spaces provided. Then circle or otherwise identify the underlying hazardous constituents, as defined in §268.2(I).]

☐ This shipment includes RCRA Section 3004(d) California list wastes, as identified on the attached sheet. [If this box is checked, attach Figure 3.17(d) and circle or otherwise indicate individual constituents likely to be present in the waste.]

☐ The wastes included in this shipment are identified below:

Container ID #	*Hazardous Waste #*	*Treatability Group*	*Subcategory*

A waste analysis for these wastes is attached, where available.

As required by 40 CFR §268.7(b)(5)(i), the following certification is made for these restricted wastes:

I certify under penalty of law that I have personally examined and am familiar with the treatment technology and operation of the treatment process used to support this certification and that, based on my inquiry of those individuals immediately responsible for obtaining this information, I believe that the treatment process has been operated and maintained properly so as to comply with the performance levels specified in 40 CFR §268.32 or RCRA §2004(d) without impermissible dilution of the prohibited waste. I am aware that there are significant penalties for submitting a false certification, including the possibility of fine and imprisonment.

Authorized Signature: _____

EXAMPLE CERTIFICATION FROM TREATMENT FACILITY TO DISPOSAL FACILITY FOR ORGANIC CONSTITUENTS AT THE ANALYTICAL DETECTION LIMIT FOR WASTES BURNED IN COMBUSTION UNITS PER §268.40(d)

The wastes identified on manifest number _____ and bearing the EPA Hazardous Waste Number(s) _____ are subject to the land disposal restrictions of 40 CFR Part 268. The wastes comply with the contamination-based treatment standards specified in Part §268.40 or RCRA Section 3004(d). The required information applicable to each waste is identified below (check all boxes that apply):

☐ This shipment includes F001-F005 spent solvents, as identified on the attached sheet. [If this box is checked, attach Figure 3.17(b), check the hazardous waste number(s) that apply, and circle or otherwise identify individual constituents likely to be present in the waste.]

☐ This shipment includes F039 multi-source leachate, as identified on the attached sheet(s). [If this box is checked, attach Figure 3.17(c) and circle or otherwise identify individual constituents likely to be present in the waste.]

☐ This shipment includes D012-D043 nonwastewaters prohibited under §268.38, as identified on the attached sheet(s). [If this box is checked, attach Figure 3.17(c) and, for each waste, identify the hazardous waste number, treatability group, and subcategory in the spaces provided. Then circle or otherwise identify the underlying hazardous constituents, as defined in §268.2(i).]

☐ The wastes included in this shipment are identified below:

Container ID #	*Hazardous Waste #*	*Treatability Group*	*Subcategory*

A waste analysis for these wastes is attached, where available.

As required by 40 CFR §268.7(b)(5)(ii), the following certification is made for these restricted wastes:

> I certify under penalty of law that I have personally examined and am familiar with the treatment technology and operation of the treatment process used to support this certification and that, based on my inquiry of those individuals immediately responsible for obtaining this information, I believe that the nonwastewater organic constituents have been treated by incineration in units operated in accordance with 40 CFR §264, Subpart O, or 40 CFR §265, Subpart O, by combustion in fuel substitution units operating in accordance with applicable technical requirements, and I have been unable to detect the nonwastewater organic constituents despite having used best good faith efforts to analyze for such constituents. I am aware that there are significant penalties for submitting a false certification, including the possibility of fine and imprisonment.

Authorized Signature: _____

EXAMPLE ONE-TIME NOTIFICATION TO BE SENT TO EPA OR STATE BY GENERATORS OR TREATERS WHO FIRST CLAIM THAT HAZARDOUS DEBRIS IS EXCLUDED FROM THE DEFINITION OF HAZARDOUS WASTE UNDER §261.3(f)(1)

On _____(date), a shipment of debris that formerly met the definition of "hazardous debris" [§268.2(h)] was made from the "Originating Facility" identified below to the "RCRA Subtitle D Facility" identified below. At the time of shipment, the debris was excluded from the definition of hazardous waste under §261.3(f).

Originating Facility:	_____	RCRA Subtitle D Facility:	_____
EPA ID #:	_____	Name:	_____
Name:	_____	Address:	_____
Address:	_____		_____
	_____		_____

The hazardous debris (which is a nonwastewater), as initially generated, consisted of _____ (described debris), had the following EPA Hazardous Waste Number(s) _____, and belonged in the following subcategory (if any) _____.

☐ The debris is excluded from the definition of hazardous waste under §261.3(f)(1) and was treated using the following technology described in §268.45 Table 1: _____.

☐ The debris was excluded from the definition of hazardous waste via a case-by-case "no longer contains" determination by the EPA Regional Administrator [§261.3(f)(2)].

☐ The debris was identified as D001, D002, and/or D012-D043 and was prohibited under §268.37 and 268.38. [If this box is checked, attach Figure 3.17(c) and, for each waste, identify the underlying hazardous constituents originally present in the debris, as defined in §268.2(i).] A waste analysis for these wastes is attached, where available.

EXAMPLE CERTIFICATION TO BE RETAINED IN GENERATOR'S OR TREATER'S FILES FOR EACH SHIPMENT WHEN DEBRIS IS EXCLUDED FROM THE DEFINITION OF HAZARDOUS WASTE UNDER §261.3(f)

On _____ (date), a shipment of debris that formerly met the definition of "hazardous debris" [§268.2(h)] was made from the "Originating Facility" identified below to the "RCRA Subtitle D Facility" identified below. At the time of shipment, the debris was excluded from the definition of hazardous waste under §261.3(f)(1).

Originating Facility:	_____	RCRA Subtitle D Facility:	_____
EPA ID #:	_____	Name:	_____
Name:	_____	Address:	_____
Address:	_____		_____
	_____		_____

The hazardous debris (which is a nonwastewater), as initially generated, consisted of _____ (described debris), had the following EPA Hazardous Waste Number(s) _____, belonged in the following subcategory (if any) _____, and was subject to the alternative treatment standards in §268.45 Table 1.

The debris is excluded from the definition of hazardous waste under §261.3(f)(1) and was treated using the following technology described in §268.45 Table 1: _____. As required by §268.7(d)(3)(iii), the following certification is made for this debris:

> I certify under penalty of law that the debris has been treated in accordance with the requirements of 40 CFR §268.45. I am aware that there are significant penalties for making a false certification, including the possibility of fine and imprisonment.
>
> Authorized Representative: _____

EXAMPLE ONE-TIME NOTICE FOR GENERATOR'S FILES WHEN WASTE IS EXCLUDED FROM THE DEFINITION OF HAZARDOUS OR SOLID WASTE OR EXEMPT FROM SUBTITLE C REGULATION

The wastes identified below are restricted wastes that are excluded from the definition of hazardous or solid waste or are exempt from RCRA Subtitle C regulations (under §§261.2 - 261.6) subsequent to the point of generation.

The restricted wastes, as initially generated, consisted of _____ (describe hazardous waste), had the following EPA Hazardous Waste Number(s) _____, and belonged in the following subcategory (if any) _____. Subsequent to generation, the waste was excluded or exempt from further RCRA regulations because it was:

_____

_____

_____

_____

_____

[Describe conditions of exclusion or exemption; for example, exempt under the domestic sewage exclusion of §261.4(a)(1).]

The current disposition of the wastes is as follows (e.g., waste was discharged to POTW):

_____

_____

_____

_____

_____

_____

EXAMPLE NOTIFICATION AND CERTIFICATION APPLICABLE TO LAB PACKS

The wastes identified on manifest number _____ and bearing the EPA Hazardous Waste Number(s) _____ are part of a lab pack and are subject to the land disposal restrictions of 40 CFR Part §268. The wastes do not meet the treatment standards specified in §268, Subpart D or do not meet the applicable prohibition levels specified in §268.32 or RCRA §3004(d). The alternative lab pack treatment standards under §268.42(c) will be used. The required information applicable to each waste is identified below (check all boxes that apply):

☐ This shipment includes F001-F005 spent solvents, as identified on the attached sheet. [If this box is checked, attach Figure 3.17(b), check the hazardous waste number(s) that apply, and circle or otherwise identify individual constituents likely to be present in the waste.]

☐ This shipment includes F-039 multi-source leachate, as identified on the attached sheet(s). [If this box is checked, attach Figure 3.17(c) and circle or otherwise identify individual constituents likely to be present in the waste.]

☐ This shipment includes D001-D002, and/or D012-D043 characteristic wastes prohibited under §§268.37 or 268.38, as identified on the attached sheet (s). [If this box is checked, attach Figure 3.17(c) and, for each waste, identify the hazardous waste number, treatability group, and subcategory in the spaces provided. *However, underlying hazardous constituents, as defined in §268.2(I), need not be determined,*]

☐ This lab pack includes RCRA Section 3004(d) California list wastes, as identified on the attached sheet. [If this box is checked, attach Figure 3.17(d) and circle or otherwise indicate individual constituents likely to be present in the waste.]

☐ The wastes included in this shipment are identified below:

Container ID #	*Hazardous Waste #*	*Treatability Group*	*Subcategory*

A waste analysis for these wastes is attached, where available.

As required by 40 CFR §268.7(b)(5)(ii), the following certification is made for these restricted wastes:

I certify under penalty of law that I have personally examined and am familiar with the waste and that the lab pack contains only wastes which have not been excluded under Appendix IV to 40 CFR §268 or solid wastes not subject to regulation under 40 CFR §261. I am aware that there are significant penalties for submitting a false certification, including the possibility of fine or imprisonment.

Authorized Signature: _____

EXAMPLE ONE-TIME NOTIFICATION AND CERTIFICATION TO BE SENT TO EPA OR STATE FOR WASTES NO LONGER EXHIBITING A CHARACTERISTIC BUT THAT DO NOT MEET THE TREATMENT STANDARDS FOR UNDERLYING HAZARDOUS CONSTITUENTS

On _____ (date), a shipment of wastes that formerly exhibited one or more characteristics of a hazardous waste (D001, D002, or D012-D043 only) was made from the "Originating Facility" identified below to the "RCRA Subtitle D Facility" identified below. At the time of shipment, the wastes no longer exhibited a characteristic of a hazardous waste, but one or more underlying hazardous constituents did not meet the universal treatment standards in §268.48.

Originating Facility:	_____	RCRA Subtitle D Facility:	_____
EPA ID #:	_____	Name:	_____
Name:	_____	Address:	_____
Address:	_____		_____
	_____		_____

The characteristic waste as initially generated had the following EPA Hazardous Waste Number(s), belonged in the following treatability group and subcategory, and (for D001, D002, and D012-D043 only) contained the underlying hazardous constituents [as defined in §268.2(I)] and as identified on the attached Figure 3.17(c):

Hazardous waste number(s) before treatment (e.g., D003)	Treatability group and subcategory (e.g., reactive cyanides nonwastewater)	Underlying hazardous constituents ☐This waste contained the underlying hazardous constituents as identified

For wastes that have been treated to remove the characteristic, but one or more underlying hazardous constituents do not meet the universal treatment standards in §268.48, the following certification is required:

> I certify under penalty of law that the waste has been treated in accordance with the requirements of 40 CFR §268.40 to remove the hazardous characteristic. This decharacterized waste contains underlying hazardous constituents that require further treatment to meet universal treatment standards. I am aware that there are significant penalties for submitting a false certification, including the possibility of fine and imprisonment.

Authorized Representative: _____

EXAMPLE ONE-TIME NOTIFICATION AND CERTIFICATION TO BE SENT TO EPA OR STATE FOR WASTES NO LONGER EXHIBITING A CHARACTERISTIC AND THAT ARE SENT TO SUBTITLE D FACILITIES

On _____ (date), a shipment of wastes that formerly exhibited one or more characteristics of a hazardous waste was made from the "Originating Facility" identified below to the "RCRA Subtitle D Facility" identified below. At the time of shipment, the wastes no longer exhibited a characteristic of a hazardous waste.

Originating Facility:	_____	RCRA Subtitle D Facility:	_____
EPA ID #:	_____	Name:	_____
Name:	_____	Address:	_____
Address:	_____		_____
	_____		_____

The characteristic waste as initially generated had the following EPA Hazardous Waste Number(s), belonged in the following treatability group and subcategory, and (for D001, D002, and D012-D043 only) contained the underlying hazardous constituents [as defined in §268.2(I)] and as identified on the attached Figure 3.17(c):

Hazardous waste number(s) before treatment (e.g., D003)	Treatability group and subcategory (e.g., reactive cyanides nonwastewater)	Underlying hazardous constituents
		☐This waste contained the underlying hazardous constituents as identified on the attached Figure3.17(c). The waste meets the treatment standard for the underlying hazardous constituents. (If the waste does not meet the treatment standards for underlying hazardous constituents, use Figure 3.21 in lieu of this form.)

For wastes with concentration-based treatment standards in §268.40 (or California list wastes), the following certification is required:

> I certify under penalty of law that I have personally examined and am familiar with the treatment technology and operation of the treatment process used to support this certification and that, based on my inquiry of those individuals immediately responsible for obtaining this information, I believe that the treatment process has been operated and maintained properly so as to comply with the performance levels specified in 40 CFR §268 Subpart D, and all applicable prohibitions set forth in 40 CFR §268.32 or RCRA §3004(d) without impermissible dilution of the prohibited waste. I am aware that there are significant penalties for submitting a false certification, including the possibility of fine and imprisonment.
>
> Authorized Representative: _____

For wastes with treatment standards expressed as technologies in §268.40, the following certification is required:

> I certify under penalty of law that the waste has been treated in accordance with the requirements of 40 CFR §268.42. I am aware that there are significant penalties for making a false certification, including the possibility of fine and imprisonment.
>
> Authorized Representative: _____

For wastes with concentration-based treatment standards in §268.40 based on total composition, if compliance with the treatment standards is based, in part or in whole, on the analytical detection limit alternative specified in §268.40(d), the following certification is required:

> I certify under penalty of law that I have personally examined and am familiar with the treatment technology and operation of the treatment process used to support this certification and that, based on my inquiry of those individuals immediately responsible for obtaining this information, I believe that the nonwastewater organic constituents have been treated by incineration in units operated in accordance with 40 CFR §264, Subpart O or 40 CFR §265, Subpart O, or by combustion in fuel substitution units operating in accordance with applicable technical requirements, and I have been unable to detect the nonwastewater organic constituents despite having used best good faith efforts to analyze for such constituents. I am aware that there are significant penalties for submitting a false certification, including the possibility of fine and imprisonment.

Authorized Representative: _____

Authorized Signature: _____

EXAMPLE CERTIFICATION FROM TREATMENT FACILITY TO GENERATOR FOR TOXIC SUBSTANCES CONTROL ACT REGULATED PCB WASTES PER 40 CFR 761.3

Disposal was completed for wastes identified on manifest number _____ and bearing the EPA Hazardous Waste Number(s) _____ containing Toxic Substances Control Act (TSCA)-regulated plychlorinated biphenyls (PCB) and subject to the disposal restrictions of 40 CFR §761, Subpart K.

Disposal Facility: _____
EPA ID #: _____
Name: _____
Address: _____
_____
_____
Date of Disposal: _____
Disposal Process Used: _____

A waste analysis for these wastes is attached, where applicable.

Container ID #	*Hazardous Waste #*	*Treatability Group*	*Subcategory*

As required by 40 CFR §761.3, the following certification is made for these restricted wastes:

> Under civil and criminal penalties of law for the making or submission of false or fraudulent statements or representations (18 U.S.C. 1001 and 15 U.S.C. 2615), I certify that the information contained in or accompanying this document is true, accurate, and complete. As to the identified section(s) of this document for which I cannot personally verify truth and accuracy, I certify as the company official having supervisory responsibility for the persons who, acting under my direct instructions, made the verification that this information is true, accurate, and complete.

Authorized Signature: _____

Example

Mixed Waste Pre-Shipment Notification Form

		Shipment Approval Number	
1. Broker/ Shipper		7. Shipper Telephone	
2. Client		8. Client Contact	
3. Carrier		9. Client Telephone	
4. Manifest Number		10. Client Fax Number	
5. Ship Date			
6. Arrival Date			

11. Hazardous Waste Description (Include all hazardous waste codes applicable to the shipment.)

12. List All Isotopes and Total Activity of Each Shipment: (Computer generated shipment summary sheet may be used.)

Isotope	Activity		Isotope	Activity		Isotope	Activity	
		mCi			mCi			mCi
		mCi			mCi			mCi
		mCi			mCi			mCi
		mCi			mCi			mCi
		mCi			mCi			mCi
		mCi			mCi			mCi
		mCi			mCi			mCi
		mCi			mCi			mCi
		mCi			mCi	Total		mCi

13. Total SNM for Shipment (Grams)		14. Total Source for Shipment (Kgs)	
15. Shipment Net Volume (Ft^3)		16. Shipment Gross Weight (Lbs.)	

17. Complete the attached container information sheets or provide an advance manifest with the requested information.

18. Special processing or billing instructions

19. Acceptance of Pre-Shipment Information

Materials Control Manager or Designee — Date

20. Has a Waste Profile Sheet been submitted?	YES		NO
21. Waste Profile Number:	WP:		
22. Has Four Week Advance Notice been provided for receipt of out-of-state waste?	YES		NO
23. Has Written Notification of Authorization to Ship Waste been received?	YES		NO
24. Are you exporting from the Rocky Mountain Compact ?	YES		NO
25. If block 26 is yes, do you have an export permit ?	YES	N/A	NO
26. Are you declaring any part of this waste to be NORM, NARM or exempt ?	YES		NO
27. If block 26 is yes, do you have a determination letter ?	YES	N/A	NO
28 Have you completed a Washington State RHF-31 Form?			

Notice: The material you are expecting to ship to Richland WA, must enter the state at one of two entry points. The driver will be required to stop for an inspection of the vehicle to insure compliance with the State of Washington and Department of Transportation requirements for vehicles carrying hazardous materials. The Transport vehicle will not be allowed entry into the state until the vehicle passes this inspection. The shipment cannot be accepted without a certificate of inspection from one of these checkpoints:

1.) Weigh Station at Plymouth (I-82) Phone (509) 734-7043
2.) Weigh Station at Spokane (I-90) Phone (509) 226-3366

The driver must notify one of these checkpoints by phone 4 hours prior to entering the state. A personal monetary fine of $100 can be levied for failure to stop at one of the above checkpoints. A lengthy delay may also be expected in addition to the $100 fine. Please make all drivers aware of these requirements before leaving your facility.

29. I hereby certify this form is complete to the best of my knowledge and the waste meets the requirements of the Mixed Waste Acvceptance Criteria, Rev. 1. For waste that does not meet thtat criteria, variance approval has been received. Name of Representative approving the variance: or N/A

Shipper Signature: _____ Date: _____

Shipper Name (Print): _____ Phone: _____

This form is to be completed and sent to Richland WA, at least 5 days but no later than 48 hours prior to departure of your shipment. If a shipment arrives without a shipment approval number it may result in excessive delays and demurrage charges or possible return of the shipment to the generator.

Example

Container Information for Manifest # _____

(A draft manifest may be sent in place of the information below, if it contains all of the requested information.)

Container ID#	Profile #	Waste Codes	Physical Form	Gross Vol. (Ft^3)	Net Wt. (Lbs.)	Labpack? Y or N	Requested Process	Disposal Site

Waste Acceptance Criteria

Example **Container Metals Information for Manifest: _____**

(List the total ppm (mg/kg) of each chemical constituent in the container. Attach extra sheets if necessary. A list of chemical constituents requiring consideration is attached.)

Chemical:													
Container ID#	(mg/kg)	(mg/kg)	(mg/kg)	(mg/kg)	(mg/kg)	(mg/kg)	(mg/kg)	(mg/kg)	(mg/kg)	(mg/kg)	(mg/kg)	(mg/kg)	(mg/kg)

The following list of chemicals is to be specifically considered when completing the Mixed Waste Acceptance Criteria:

Metals

- Antimony
- Arsenic
- Barium
- Beryllium
- Cadmium
- Chromium
- Lead
- Mercury
- Nickel
- Selenium
- Silver
- Thallium
- Total Chlorine/Chloride

Organics

- Benzene
- Carbon Tetrachloride
- Chlordance
- Chlorobenzene
- Chloroform
- o-Cresol
- m-Cresol
- p-Cresol
- 2,4-D
- 1,4-Dichlorobenzene
- 1,2-Dichlorethane
- 1,1-Dichloroethylene
- 2,4-Dinitrotoluene
- Endrin
- Heptachlor
- Hexachlorobenzene
- Hezachlorobutadiene
- Hexachloroethane
- Lindane
- Methoxychlor
- Methyl Ethyl Ketone
- Nitrobenzene
- Pentachlorophenol
- Pyridine
- Tetrachloroethylene
- 2,4,5-Trichlorophenol
- 2,4,6-Trichlorophenol
- 2,4,5-TP (Silvex)
- Vinyl Chloride

Other

- Cyanides
- Sulfides
- PCBs
- Other (list all other known chemical constituents)

NOTE: Enter all constituents and their concentrations known to be present. The generator/ shipper signifies, by signature on the Pre-Shipment Notification Form, that to the best of their knowledge, the constituents listed are the only constituents present.

EXAMPLE WASTE PROFILE

Profile Number

Generator Information:

EPA ID#	
Generator Name	
Generator Address	
City/State/Zip	
Telephone	
Fax	

Billing Information:

☐ Electronic users: check here to copy Generator info. if same.

Broker/Site	
Address	
City/St/Zip	
Telephone	
Fax	

Check all that apply

☐ Hazardous Waste - *Include LDR-UHC Constituent Form*
- ☐ *Mercury >260 PPM*
- ☐ *Oxidizers*
- ☐ *Elemental Mercury*
- ☐ *Reactives - specify:*

☐ TSCA Regulated PCB
- ☐ *PCB Bulk Products*
- ☐ *PCB Remediation Waste*
- ☐ *PCB Articles*

☐ Radioactive Waste

☐ Non-Hazardous Waste
- ☐ Universal Waste
- ☐ Used Oil Filter
- ☐ Used Oil

Please provide a detailed description of the process that generated this waste. Attach additional sheets if needed. Note: for a line break, press alt-return.

Characterization Method: *(check ONE only)* ☐ Laboratory Analysis ☐ MSDS ☐ Generator Knowledge

Physical Description: *(check all that apply)* ☐ Solid ☐ Liquid ☐ Sludge ☐ Debris ☐ Labpack *(add inventory form)* ☐ Other:

Volume: *(include units: 30 liters, 5 gal., etc)* | Gross Weight: *(include units: 75 lbs, 10 kg, etc.)* | Container Type: | Total Number of Containers:

Overpacked: ☐ Yes ☐ No **US DOT Hazardous Material:** ☐ Yes ☐ No **Proper Shipping Name:**

DOT Hazard Class: *primary* / *subsidiary*

☐ This waste stream is subject to the Land Disposal Restriction of 40 CFR 268.
(If checked, complete a Land Disposal Restriction Notification form)

☐ This waste stream contains Benzene.
(If checked, complete the Benzene NESHAP Worksheet)

☐ This waste stream consists of off-spec used oil.

☐ This is a CERCLA waste.

For Broker Use Only

I certify the following:
The packages used to ship this material meet the requirements of 40 CFR 173 Subpart B (HazMat). This material will be inspected for consistency with the preapproved profile at the time of transportation.

Name | Date

CHEMICAL PROPERTIES AND COMPOSITION:

Percent Free Liquid: % (None=0%, all=100%) | Percent Settled Solids: % (None=0%, all=100%) | Viscosity: Centistokes

pH Actual: OR Range: to | Specific Gravity Actual: OR Range: to

CERTIFICATION

I certify that all hazards, known or suspected, have been disclosed on this profile. Further I understand that a surcharge may be imposed for any material which is rejected or requires additional handling due to the material being inconsistent with the profile, improper or damaged containers, or improper shipping documents.

1. Any sample submitted is representative as defined in 40 CFR 261-Appendix I or is obtained using an equivalent method.
2. I authorize the facility to obtain a sample from any waste shipment for purposes of verification.

Name | Title | Date

MWF Use Only

☐ Accepted ☐ Accepted with the following conditions:

☐ Rejected for the following reasons:

Designated Facility:
- ☐ DSSI
- ☐ M&EC
- ☐ PF Florida
- ☐ PFNW

MWF has all of the necessary permits and licenses for the waste that has been characterized and identified by this approved profile and accepted by the MWF.

Name | Title | Date

EXAMPLE
LAB PACK - DRUM INVENTORY

Generator Name: _____ Profile No.: _____
DOT Shipping Name: _____ Generator Drum No.: _____ Sheet _____ of _____ per drum
Hazard Class: UN/NA ID No.: _____ Outer Container Type/Size: _____

NOTE: Line item numbers on this sheetmust be entered on labels affixed to inner containers holding materials/chemicals identified on the corresponding line. Materials/Chemicals that appear in the "U" or "P" hazardous waste list must have the EPA hazardous waste code; otherwise, enter "used", "spent" or "more than one active ingredient", if it applies, to explain why the code is not assigned.

Line Item No.	Quantity and Unit (5 x 10 ml)	Materials/Chemical Name or Description	EPA Haz. Waste Codes	Physi-cal State	Contain-er Type	Comments

CERTIFICATION: The listing above is an accurate and complete description of the contents of this drum, and they are packed in accordance to 49 CFR'173.12.

GENERATOR NAME _____ SIGNATURE _____ PACKED BY: _____

*ysical State: S=Solid; L=Liquid; R=Residue (sludge), A=Aerosol; G=Gas
**Container Type: G=Glass; M=Metal; P=Plastic; F=Fiber; A=Aerosol Can; C=Gas Cylinder

EXAMPLE RADIOACTIVE WASTE ADDENDUM

(Per Waste Stream)

Help creating more of these worksheets

A. RADIOACTIVITY (per Waste Stream)

Radionuclides	Activity (mCi) *	Concentration

Radionuclides	Activity (mCi) *	Concentration

Radionuclides	Activity (mCi) *	Concentration

* Not required for LSVs

SNM in grams: | Total Pu: | U-235: | U-233:

B. RADIATION LEVELS FROM OUTSIDE SURFACE OF PACKAGE(S):

Max: mR/hr

Avg: mR/hr

☐ Check here if additional information concerning this Waste Stream is attached and indicate the number of attached pages:

How to Fill out this Form

What is a Waste Stream:

1. If there are different types of waste, there are different waste streams (i.e. liquids, soil, PPE are different waste streams)
2. Multiple containers of the same type of waste are considered part of one waste stream (i.e. 4 drums of LSV).
3. a. Annual profiling is required by generator only, not by shipment or package.
   b. Total types of radionuclides are to be listed. Total radioactivity is not required.
   c. Each drum will be priced upon receipt according to established fee schedules. If there are questions, please contact the facility prior to shipping.

For each radionuclide in this particular Waste Stream, list the radionuclide (i.e. Cs-137) and the activity in millicuries, and the concentration or specific Activity *(activity per unit mass)*.

Measure the outside of the package(s) and record the highest reading.

Help creating additional Rad Waste Addendum worksheets

1. With your mouse, move the cursor over the tab below which is marked **Rad Waste Addendum**.
2. Click using your right mouse button.
3. Select the option **Move or Copy...**
4. In the box **Before sheet:**, highlight **LDR**.
5. Also check the box labeled **Create a copy**.
6. Hit **OK**.
7. A duplicate worksheet will be created and it will be called **Rad Waste Addendum (2)**.
8. Repeat the above procedure as often as required.

Rev. 5/02

EXAMPLE

WASTE CODE INFORMATION

Please list all D,F,K,P, U and WA State codes that this waste carries. WA state codes for PFNW only.

EPA Hazardous Waste Codes				

ADDITIONAL CHEMICAL CONSTITUENT DISCLOSURE

List any known chemical components that are not reported elsewhere in the profile.
Attach additional sheets if necessary.
(Constituents should add up to 100%)

Chemical Constituents	Concen-tration	(Units)

Chemical Constituents	Concen-tration	(Units)

EXAMPLE LAND DISPOSAL RESTRICTION & CERTIFICATION FORM

Generator Name | Generator USEPA ID No.

Generator Address | City/ST/Zip

State Manifest No. | Manifest Doc. No.

Instructions

1 In Column 1 identify all USEPA hazardous waste codes that apply to this waste shipment.
2 In Column 2, choose the appropriate treatability group: Non-Wastewater (NWW) or Wastewater (WW).
3 In Column 3, enter the appropriate Subcategory, if applicable, and also enter "Contaminated Soil" or "Debris" if the waste can be treated using one of the alternative treatment technologies provided by 268.49(c) (soil) or 268.45 (debris).
4 In Column 4, circle the letter of the appropriate LDR management categories on the back of this form.
5 In Column 5, enter the Reference Number(s) from the LDR-UHC Constituent Table for any constituents subject to treatment in your waste stream.

Go to LDR-UHC Constituent Table

Manifest Line Item #	1. USEPA HAZARDOUS WASTE CODES	2. NWW or WW	3. SUBCATEGORY	4. HOW MUST THE WASTE BE MANAGED (Check one) A	B	C	D	E	F	G	H	Soil Only	5. REFERENCE NUMBER(s) of Hazardous Constituents contained in the waste.
11.A		NWW / WW										Does / Does Not is subject to / complies with	
11.B		NWW / WW										Does / Does Not is subject to / complies with	
11.C		NWW / WW										Does / Does Not is subject to / complies with	
11.D		NWW / WW										Does / Does Not is subject to / complies with	

I hereby certify that all information submitted on this and all associated documents is complete and accurate to the best of my knowledge and information.

Generator Name | Title | Date

A. THIS RESTRICTED WASTE REQUIRES TREATMENT TO THE APPLICABLE STANDARD. This waste must be treated to the applicable performance based treatment standard set forth in 40CFR Part 268 Subpart C, 268.32, Subpart D, 268.40 or RCRA Section 3004(d) prior to land disposal.

B. THIS HAZARDOUS DEBRIS MAY BE TREATED USING THE DEBRIS ALTERNATIVE TREATMENT STANDARDS OF 40 CFR 268.45. I certify under penalty of law that I personally have examined and am familiar with the waste and that the statement above is true and that thiswaste meets the definition of debris and can be treated using the alternate methods specified in 40 CFR 268.45. I am aware that there are significant penalties for submitting a false certification including possibility of fine or imprisonment.

C. THIS RESTRICTED WASTE HAS BEEN TREATED TO THE APPLICABLE TREATMENT STANDARD(S). I certify under penalty of law that I personnaly have examined and am familiar with the waste through analysis and testing or through knowledge of the waste to support this certification that the waste complies with the treatment standards specified in 40 CFR 268 Subpart D. I believe that the information I submitted is true, accurate, and complete. I am aware that there are significant penalties for submitting a false certification, including the possibility of a fine and imprisonment.

D. THIS RESTRICTED DEBRIS HAS BEEN TREATED IN ACCORDANCE WITH 40 CFR 268.45. I certify under penalty of law that the debris has been treated in accordance with the requirements of 40 CFR 268.45. I am aware that there are significant penalties for making false certification, including the possibility of a fine and imprisonment.

E. THIS LAB PACK DOES NOT CONTAIN ANY WASTES IDENTIFIED AT APPENDIX IV TO PART 268. I certify under penalty of law that I personally have examined and am familiar with the waste and that the statement above is true and that this lab pack will be sent to a combustion facility in compliance with the alternative treatment standards for lab packs at 40 CFR 268.42(c). I am aware that there are significant penalties for submitting a false certification including possibility of fine or imprisonment.

F. THIS RESTRICTED WASTE HAS BEEN TREATED TO REMOVE THE HAZARDOUS CHARACTERISTIC. I certify under penalty of law that the waste has been treated in accordance with the requirements of 40 CFR 268.40 to remove the hazardous characteristic. This decharacterized waste contains underlying hazardous constituents that require further treatment to meet universal treatment standards. I am aware that there are significant penalties for submitting a false certification, including the possibility of fine and imprisonment.

G. THIS RESTRICTED WASTE HAS BEEN TREATED TO REMOVE THE HAZARDOUS CHARACTERISTIC AND BEEN TREATED FOR UNDERLYING HAZARDOUS CONSTITUENTS. I certify under penalty of law that the waste has been treated in accordance with the requirements of 40 CFR 268.40 to remove the hazardous characteristic, and that underlying hazardous constituents, as defined in 268.48 Universal Treatment Standards. I am aware that there are significant, penalties for submitting false certification, including the possibility of fine and imprisonment.

H. THIS RESTRICTED WASTE IS SUBJECT TO AN EXEMPTION FROM LAND DISPOSAL. (Please include the date the waste is subject to the prohibitions in Column 5) This waste is subject to an exemption from a prohibition on the type of land disposal method utilized for the waste (such as, but not limited to, a case-by-case extension under 40 CFR Part 268.5, or an exemption under 40 CFR 268.6.

S. THIS CONTAMINATED SOIL ***(DOES / DOES NOT)*** CONTAIN LISTED HAZARDOUS WASTE AND ***(DOES / DOES NOT)*** EXHIBIT A CHARACTERISTIC OF HAZARDOUS WASTE AND ***(IS SUBJECT TO / COMPLIES WITH)*** THE SOIL TREATMENT STANDARDS AS PROVIDED BY 268.49(c) OR THE UNIVERSAL TREATMENT STANDARDS. I certify under penalty of law that I have personally examined and am familiar with the treatment technology and operation of the treatment process used to support this certification and believe that it his been maintained and operated properly so as to comply with treatment standards specified in 40 CFR 268.49 without impermissible dilution of the prohibited wastes. I am aware that there are significant penalties for submitting a false certification, including the possibility of fine and imprisonment.

Example **Resource Guide**

Underlying Hazardous Constituent (UHC)
Land Disposal Restriction (LDR) Constituents

					Concentration			
Ref #:	Hazardous Constituent	CAS NO.	NWW (mg/kg)	WW (mg/kg)	*11a*	*11b*	*11c*	*11d*
1	Acenaphthene	83-32-9	3.4	0.059				
2	Acenaphthylene	208-96-8	3.4	0.059				
3	Acetone	67-64-1	160	0.28				
4	Acetonitrile	75-05-8	38	5.6				
5	Acetophenone	96-86-2	9.7	0.01				
6	2-Acetylaminofluorene	53-96-3	140	0.059				
7	Acrolein	107-02-8	NA	0.29				
8	Acrylonitrile	107-13-1	84	0.24				
9	Acrylamide	79-06-1	23	19				
10	Aldrin	309-00-2	0.066	0.021				
11	4-Aminobiphenyl	92-67-1	NA	0.13				
12	Aniline	62-53-3	14	0.81				
13	Anthracene	120-12-7	3.4	0.059				
14	Aramite	140-57-8	NA	0.36				
15	alpha-BHC	319-84-6	0.066	0.00014				
16	beta-BHC	319-85-7	0.066	0.00014				
17	delta-BHC	319-86-8	0.066	0.023				
18	gamma-BHC (Lindane)	58-89-9	0.066	0.0017				
19	Benz(a)anthracene	56-55-3	3.4	0.059				
20	Benzal chloride	98-87-3	6	0.055				
21	Benzene	71-43-2	10	0.14				
22	Benzo(a)pyrene	50-32-8	3.4	0.061				
23	Benzo(b)fluoranthene	205-99-2	6.8	0.11				
24	Benzo(k)fluoranthene	207-08-9	6.8	0.11				
25	Benzo(g,h,i)perylene	191-24-2	1.8	0.0055				
26	bis(2-Chloroethoxy)methane	111-91-1	7.2	0.036				
27	bis(2-Chloroethyl)ether	111-44-4	6	0.033				
28	bis(2-Chloroisopropyl) ether	39638-32-9	7.2	0.055				
30	Bromodichloromethane	75-27-4	15	0.35				
31	Bromomethane (Methyl bromide)	74-83-9	15	0.11				
32	4-Bromophenyl phenyl ether	101-55-3	15	0.055				
33	n-Butyl alcohol	71-36-3	2.6	5.6				
34	Butyl benzyl phthalate	85-68-7	28	0.017				
35	2-sec-Butyl-4,6-dinitrophenol (Dinoseb)	88-85-7	2.5	0.066				
36	Carbon disulfide	75-15-0	4.8*	3.8				
37	Carbon tetrachloride	56-23-5	6	0.057				
38	Chlordane (alpha and gamma isomers)	57-74-9	0.26	0.0033				
39	p-Chloroaniline	106-47-8	16	0.46				
40	Chlorobenzene	108-90-7	6	0.057				
41	Chlorobenzilate	510-15-6	NA	0.1				
42	2-Chloro-1, 3-butadiene (Chloroprene)	126-99-8	0.28	0.057				
43	Chlorodibromomethane	124-48-1	15	0.057				
44	Chloroethane	75-00-3	6	0.27				
45	Chloroform	67-66-3	6	0.046				
46	p-Chloro-m-cresol	59-50-7	14	0.018				
47	2-Chloroethyl vinyl ether	110-75-8	NA	0.062				
48	Chloromethane (Methyl chloride)	74-87-3	30	0.19				
49	2-Chloronaphthalene	91-58-7	5.6	0.055				
50	2-Chlorophenol	95-57-8	5.7	0.044				
51	3-Chloropropylene (Allyl Chloride)	107-05-1	30	0.036				
52	Chrysene	218-01-9	3.4	0.059				

					Concentration			
Ref #:	Hazardous Constituent	CAS NO.	NWW (mg/kg)	WW (mg/kg)	*11a*	*11b*	*11c*	*11d*
53	o-Cresol (2-Methyl phenol)	95-48-7	5.6	0.11				
4	m-Cresol (3-Methyl phenol)	108-39-4	5.6	0.77				
55	p-Cresol (4-Methyl phenol)	106-44-5	5.6	0.77				
56	Cyclohexanone	108-94-1	0.75 *	0.36				
57	o,p'-DDD	53-19-0	0.087	0.023				
58	p,p'-DDD	72-54-8	0.087	0.023				
59	o,p'-DDE	3424-82-6	0.087	0.031				
60	p,p'-DDE	72-55-9	0.087	0.031				
61	o,p'-DDT	789-02-6	0.087	0.0039				
62	p,p'-DDT	50-29-3	0.087	0.0039				
63	Dibenz(a,h)anthracene	53-70-3	8.2	0.055				
64	Dibenz(a,e)pyrene	192-65-4	NA	0.061				
65	1,2-Dibromo-3-chloropropane	96-12-8	15	0.11				
66	1,2-Dibromoethane (Ethylene dibromide)	106-93-4	15	0.028				
67	Dibromomethane	74-95-3	15	0.11				
68	m-Dichlorobenzene (1,3-Dichlorobenzen	541-73-1	6	0.036				
69	o-Dichlorobenzene (1,2-Dichlorobenzene	95-50-1	6	0.088				
70	p-Dichlorobenzene (1,4-Dichlorobenzene	106-46-7	6	0.09				
71	Dichlorodifluoromethane	75-71-8	7.2	0.23				
72	1,1-Dichloroethane	75-34-3	6	0.059				
73	1,2-Dichloroethane	107-06-2	6	0.21				
74	1,1-Dichloroethylene	75-35-4	6	0.025				
75	trans-1,2-Dichloroethylene	156-60-5	30	0.054				
76	2,4-Dichlorophenol	120-83-2	14	0.044				
77	2,6-Dichlorophenol	87-65-0	14	0.044				
78	2,4-Dichlorophenoxyacetic acid (2,4-D)	94-75-7	10	0.72				
9	1,2-Dichloropropane	78-87-5	18	0.85				
80	cis-1,3-Dichloropropylene	10061-01-5	18	0.036				
81	trans-1,3-Dichloropropylene	10061-02-6	18	0.036				
82	Dieldrin	60-57-1	0.13	0.017				
83	Diethyl phthalate	84-66-2	28	0.2				
84	p-Dimethylaminoazobenzene	60-11-7	NA	0.13				
85	2,4-Dimethyl phenol	105-67-9	14	0.036				
86	Dimethyl phthalate	131-11-3	28	0.047				
87	Di-n-butyl phthalate	84-74-2	28	0.057				
88	1,4-Dinitrobenzene	100-25-4	2.3	0.32				
89	4,6-Dinitro-o-cresol	534-52-1	160	0.28				
90	2,4-Dinitrophenol	51-28-5	160	0.12				
91	2,4-Dinitrotoluene	121-14-2	140	0.32				
92	2,6-Dinitrotoluene	606-20-2	28	0.55				
93	Di-n-octyl phthalate	117-84-0	28	0.017				
94	Di-n-propylnitrosamine	621-64-7	14	0.4				
95	1,4-Dioxane	123-91-1	170	12				
96	Diphenylamine	122-39-4	13	0.92				
97	Diphenylnitrosamine	86-30-6	13	0.92				
98	1,2-Diphenylhydrazine	122-66-7	NA	0.087				
99	Disulfoton	298-04-3	6.2	0.017				
100	Endosulfan I	959-98-9	0.066	0.023				
101	Endosulfan II	33213-65-9	0.13	0.029				
102	Endosulfan sulfate	1031-07-8	0.13	0.029				
103	Endrin	72-20-8	0.13	0.0028				
104	Endrin aldehyde	7421-93-4	0.13	0.025				
105	2-Ethoxyethanol (FO05)+			INCIN				
106	Ethyl acetate	141-78-6	33	0.34				
107	Ethyl benzene	100-41-4	10	0.057				

					Concentration			
Ref #:	Hazardous Constituent	CAS NO.	NWW (mg/kg)	WW (mg/kg)	*11a*	*11b*	*11c*	*11d*
108	Ethyl ether	60-29-7	160	0.12				
109	Ethyl methacrylate	97-63-2	160	0.14				
110	Ethylene oxide	75-21-8	NA	0.12				
111	Famphur	52-85-7	15	0.017				
112	Fluoranthene	206-44-0	3.4	0.068				
113	Fluorene	86-73-7	3.4	0.059				
114	Heptachlor	76-44-8	0.066	0.0012				
115	Heptachlor epoxide	1024-57-3	0.066	0.016				
116	Hexachlorobenzene	118-74-1	10	0.055				
117	Hexachlorobutadiene	87-68-3	5.6	0.055				
118	Hexachlorocyclopentadiene	77-47-4	2.4	0.057				
119	HxCDDs (All Hexachlorodibenzo-p-dioxin	NA	0.001	0.000063				
120	HxCDFs (All Hexachlorodibenzofurans)	NA	0.001	0.000063				
121	Hexachloroethane	67-72-1	30	0.055				
122	Hexachloropropylene	1888-71-7	30	0.035				
123	Indeno (1,2,3-c,d) pyrene	193-39-5	3.4	0.0055				
124	Iodomethane	74-88-4	65	0.19				
125	Isobutyl alcohol (Isobutanol)	78-83-1	170	5.6				
126	Isodrin	465-73-6	0.066	0.021				
127	Isosafrole	120-58-1	2.6	0.081				
128	Kepone	143-50-0	0.13	0.0011				
129	Methacrylonitrile	126-98-7	84	0.24				
130	Methanol	67-56-1	0.75 *	5.6				
131	Methapyrilene	91-80-5	1.5	0.081				
132	Methoxychlor	72-43-5	0.18	0.25				
133	3-Methylchloroanthrene	56-49-5	15	0.0055				
134	4,4-Methylene bis (2-chloroaniline)	101-14-4	30	0.5				
135	Methylene chloride	75-09-2	30	0.089				
136	Methyl ethyl ketone	78-93-3	36	0.28				
137	Methyl isobutyl ketone	108-10-1	33	0.14				
138	Methyl methacrylate	80-62-6	160	0.14				
139	Methyl methanesulfonate	66-27-3	NA	0.018				
140	Methyl parathion	298-00-0	4.6	0.014				
141	Naphthalene	91-20-3	5.6	0.059				
142	2-Naphthylamine	91-59-8	N/A	0.52				
143	o- Nitroaniline	88-74-4	14	0.27				
144	p-Nitroaniline	100-01-6	28	0.028				
145	Nitrobenzene	98-95-3	14	0.068				
146	5-Nitro-o-toluidine	99-55-8	28	0.32				
147	o-Nitrophenol	88-75-5	13	0.028				
148	p-Nitrophenol	100-02-7	29	0.12				
149	2-Nitropropane (FO05)+			INCIN				
150	N-Nitrosodiethylamine	55-18-5	28	0.4				
151	N-Nitrosodimethylamine	62-75-9	2.3	0.4				
152	N-Nitroso-di-n-butylamine	924-16-3	17	0.4				
153	N-Nitrosomethylethylamine	10595-95-6	2.3	0.4				
154	N-Nitrosomorpholine	59-89-2	2.3	0.4				
155	N-Nitrosopiperidine	100-75-4	35	0.013				
156	N-Nitrosopyrrolidine	930-55-2	35	0.013				
157	Parathion	56-38-2	4.6	0.014				
158	Total PCBs	1336-36-3	10	0.1				
159	Pentachlorobenzene	608-93-5	10	0.055				
160	PeCDDs (All Pentachlorodibenzo-p-dioxi	NA	0.001	0.000063				
161	PeCDFs (All Pentachlorodibenzofurans)	NA	0.001	0.000035				
162	Pentachloroethane	76-01-7	6	0.055				

					Concentration			
Ref #:	Hazardous Constituent	CAS NO.	NWW (mg/kg)	WW (mg/kg)	*11a*	*11b*	*11c*	*11d*
163	Pentachloronitrobenzene	82-68-8	4.8	0.055				
64	Pentachlorophenol	87- 86-5	7.4	0.089				
165	Phenacetin	62-44-2	16	0.081				
166	Phenanthrene	85-01-8	5.6	0.059				
167	Phenol	108-95-2	6.2	0.039				
168	Phorate	298-02-2	4.6	0.021				
169	Phthalic acid	100-21-0	28	0.055				
170	Phthalic anhydride	85-44-9	28	0.055				
171	Pronamide	23950-58-5	1.5	0.093				
172	Propanenitrile (Ethyl cyanide)	107-12-0	360	0.24				
173	Pyrene	129-00-0	8.2	0.067				
174	Pyridine	110-86-1	16	0.014				
175	Safrole	94-59-7	22	0.081				
176	Silvex (2,4,5-TP)	93-72-1	7.9	0.72				
177	1,2,4,5-Tetrachlorobenzene	95-94-3	14	0.055				
178	TCDDs (All Tetachlorodibenzo-p-dioxins)	NA	0.001	0.000063				
179	TCDFs (All Tetrachlorodibenzofurans)	NA	0.001	0.000063				
180	1,1,1,2-Tetrachloroethane	630-20-6	6	0.057				
181	1, 1,2,2-Tetrachloroethane	79-34-5	6	0.057				
182	Tetrachloroethylene	127-18-4	6	0.056				
183	2,3,4,6-Tetrachlorphenol	58-90-2	7.4	0.03				
184	Toluene	108-88-3	10	0.08				
185	Toxaphene	8001-35-2	2.6	0.0095				
186	Tribromomethane (Bromoform)	75-25-2	15	0.63				
187	1,2,4-Trichlorobenzene	120-82-1	19	0.055				
188	1, 1, 1 -Trichloroethane	71-55-6	6	0.054				
89	1, 1,2-Trichloroethane	79-00-5	6	0.054				
190	Trichloroethylene	79-01-6	6	0.054				
191	Trichloromonofluoromethane	75-69-4	30	0.02				
192	2,4,5-Trichlorophenol	95-95-4	7.4	0.18				
193	2,4,6-Trichlorophenol	88-06-2	7.4	0.035				
194	2,4,5-Trichlorophenoxyacetic acid/2,4,5-T	93-76-5	7.9	0.72				
195	1,2,3-Trichloropropane	96-18-4	30	0.85				
196	1,1,2-Trichloro- 2,2,2-trifluoroethane	76-13-1	30	0.057				
197	tris-(2,3-Dibromopropyl) phosphate	126-72-7	0.1	0.011				
198	Vinyl chloride	75-01-4	6	0.27				
199	Xylenes	1330-20-7	30	0.32				
200	Antimony	7440-36-0	1.15*	1.9				
201	Arsenic	7440-38-2	5.0 *	1.4				
202	Barium	7440-39-3	21 *	1.2				
203	Beryllium	7440-41-7	1.22 *	0.82				
204	Cadmium	7440-43-9	0.11 *	0.69				
205	Chromium (Total)	7440-47-3	0.60 *	2.77				
206	Cyanides (Total)	57-12-5	590	1.2				
207	Cyanides (Amenable)	57-12-5	30	0.86				
208	Fluoride	16984-48-8	NA	35				
209	Lead	7439-92-1	0.75 *	0.69				
210	Mercury (retort residues)	7439-97-6	0.2 *	NA				
211	Mercury (all others)	7439-97-6	0.025 *	0.15				
212	Nickel	7440-02-0	11 *	3.98				
213	Selenium	7782-49-2	5.7 *,**	0.82				
214	Silver	7440-22-4	0.14	0.43				
215	Sulfide	18496-25-8	NA	14				
216	Thallium	7440-28-0	0.2	1.4				
217	Vanadium	7440-62-2	1.6*,**	4.3				

					Concentration			
Ref #:	Hazardous Constituent	CAS NO.	NWW (mg/kg)	WW (mg/kg)	*11a*	*11b*	*11c*	*11d*
218	Zinc	7440-66-6	4.3*,**	2.61				
220	Aldicarb sulfone	1646-88-4	0.28	0.056				
221	Barban	101-27-9	1.4	0.056				
222	Bendiocarb	22781-23-3	1.4	0.056				
224	Benomyl	17804-35-2	1.4	0.056				
225	Butylate	2008-41-5	1.4	0.042***				
226	Carbaryl	63-25-2	0.14	0.006				
227	Carbenzadim	10605-21-7	1.4	0.056				
228	Carbofuran	1563-66-2	0.14	0.006				
229	Carbofuran phenol	1563-38-8	1.4	0.056				
230	Carbosulfan	55285-14-8	1.4	0.028				
231	m-Cumenyl methylcarbamate	64-00-6	1.4	0.056				
233	Diethylene glycol, dicarbamate	5952-26-1	1.4	0.056				
235	Dithiocarbamates (total)	137-30-4	28	0.028				
236	EPTC	759-94-4	1.4	0.042				
237	Formetanate hydrochloride	23422-53-9	1.4	0.056				
241	Methiocarb	2032-65-7	1.4	0.056				
242	Methomyl	16752-77-5	0.14	0.028				
243	Metolcarb	1129-41-5	1.4	0.056				
244	Mexacarbate	315-18-4	1.4	0.056				
245	Molinate	2212-67-1	1.4	0.042				
246	Oxamyl	23135-22-0	0.28	0.056				
247	Pebulate	1114-71-2	1.4	0.042				
249	Physostigmine	57-47-6	1.4	0.056				
250	Physostigmine salicylate	57-64-7	1.4	0.056				
251	Promecarb	2631-37-0	1.4	0.056				
252	Propham	122-42-9	1.4	0.056				
253	Propoxur	114-26-1	1.4	0.056				
254	Prosulfocarb	52888-80-9	1.4	0.042				
255	Thiodicarb	59669- 26-0	1.4	0.019				
256	Thiophanate-methyl	23564-05-8	1.4	0.056				
258	Triallate	2303-17-5	1.4	0.042				
259	Triethylamine	101-44-8	1.5	0.081				
260	Vernolate	1929-77-7	1.4	0.042				

* "Concentration in mg/l TCLP"

** Not Underlying Hazardous Constituents. (See 60 FR, Jan. 3,1995)

*** The preamble to the final rule (61 FR 15584) clearly indicates that the wastewater treatment standard for thiocarbamate constituents has been revised to 0.042mg/l. However, the '268.48 universal treatment standards table still shows 0.003 mg/l.

I These UTS levels are effective on August 24, 1998 as established in 63 FIR 28556-28753, the finalized Phase IV-Part 2 land disposal restrictions (LDR) rule.

EXAMPLE BENZENE NESHAP QUESTIONNAIRE

Generator: _____ Profile Number: _____

1. Does the waste stream come from a facility with one of the following SIC codes listed under the NESHAP?

NESHAP SIC Codes

2812	2813	2816
2819	2821	2822
2823	2824	2833
2834	2835	2836
2841	2842	2843
2844	2851	2861
2865	2869	2873
2874	2875	2879
2891	2892	2893
2895	2899	2911
3087	3312	3861
3952	3999	4923
4924	4925	4931
4932	4939	4953
4959	7389	9511

☐ Yes Please go to the next question.
☐ No STOP. Please fill in your Name, Title and Date at the end of this form.

2. What is your facility's total annual benzene (TAB) quantity generated? _____ (lb/yr)

3. For what calendar year was the TAB calculated? _____

4. What is the total Benzene concentration in your waste?

_____ percent _____ ppm weight _____ Unknown

Please attach analytical.

What acceptable EPA SW-846 or Water methods were used to analyze this waste?

☐ EPA SW-846 Method _____ or,
☐ Water Method _____, or
☐ Generator Knowledge, if generator knowledge, please attach a breif description.

5. Does this waste stream contain greater than 10% water?

☐ Yes
☐ No This waste stream is exempt.

If yes, what is the average concentration? _____ %

Certification

I hereby certify, under penalty of law, that the above information is true, complete and factual and is an acurate representation of the known and suspected hazards, pertaining to the waste described herein. I will notify the facility if any of the information above changes.

Name	Title	Date

EXAMPLE PCB ADDENDUM

Generator: | | Profile Number: | |

Waste Description

Please complete all sections of the table for each PCB waste stream

Physical Description of Waste (e.g., sludge, dielectric fluid)	Number/Type of Containers	Total PCB Waste Weight	Date Article Removed from Service for Disposal	Total PCB Concentration

Certification

I hereby certify, under penalty of law, that the above information is true, accurate and complete to the best of my knowledge.

Name	Title	Date